CHAPTER 2:

PROPOSAL RESPONSE FORMS

CHAPTER 2:

PROPOSAL PREPARATION INSTRUCTIONS

Chapter Two of this RFP provides all of the forms vendors must complete to submit their proposals. **Vendors should attach a copy of the licensing and maintenance agreement for the proposed system. Vendors should not submit any other materials.**

To prepare your proposal, follow the instructions:

1. Open the electronic version of Chapter Two in your word processing application (Microsoft Word 97). Note: this chapter is available as a stand-alone document for the purpose of developing your proposal.

2. Complete all the forms in your word processing application, following the existing section and form numbering convention. Please remember to delete the text contained in brackets (i.e. the instructions) for each form.

3. When your proposal is finished, provide the proposal in accordance with the instructions in Chapter One, Section 2.6 of the RFP.

SECTION 1:   ADMINISTRATIVE CERTIFICATIONS

FORM 1:   PROPOSAL CERTIFICIATION

[This form constitutes your proposal certification. Complete all information electronically, then sign your printed copy.]

TO: Department of Design, Construction and Land Use
          Dwight Dively, Director, Administrative Services

The undersigned Proposer hereby certifies as follows:

That he/she has read the City's Request for proposals for a Electronic Document Management System, RFP # **DCLU-35**, Appendices and Forms, and following RFP Addenda, and to the best of his/her knowledge, has complied with the mandatory requirements stated herein.

Addendum Number	Issue Date
_____	_____
_____	_____
_____	_____
_____	_____

That he/she has had opportunity to ask questions regarding the Request for Proposal, and that if such questions have been asked, they have been answered by the City.

That the Proposer's proposal consists of the following documents:
- A separately signed non-collusion certificate (Form 2);
- Taxpayer Identification Number and Certification Request Form (Form 3) of this proposal, if applicable;
- Proposal Forms 4-19;

That the vendor's proposal is valid for 90 days.

Dated at_____, this_____day of _____, 2000

Name: _____

Signature:_____

Title:_____

Company:_____

FORM 2: NON-COLLUSION CERTIFICATE

[This form constitutes your non-collusion certificate. Complete all information electronically, then sign your printed copy and have it notarized.]

CITY OF SEATTLE
NON-COLLUSION CERTIFICATE

State of   {   }
County of {   }

The undersigned, being duly sworn, deposes and says that the person, firm, association, co-partnership or cooperation herein named, has not, either directly or indirectly, entered into any agreement, participated in any collusion, or otherwise taken any action in restraint of free competitive pricing in the preparation and submission of a proposal to the City of Seattle for consideration in the award of a contract for a Electronic Document Management System.

_____
Name of Firm

_____
Signature of Authorized Member

Sworn to before me this

_____day of _____, 20_____

_____
        Notary Public

FORM 3: PAYMENT INFORMATION AND QUALIFICATION FORM

[Complete all information electronically, then sign your printed copy.]

In order for the City of Seattle to make payments to you or to procure goods or services from you, we need the information requested on the attached Payment Information & Qualification form. The information about you will be entered into our computerized payment system and will allow us to make required reports to the Federal Government about our business and payment transactions. (For businesses and organizations, we regret that we cannot accept your Federal W-9 form instead of this form.)

If we do not receive a fully completed form from you within 20 days from the postmarked or e-mailed date:

1) The City may not be able to send you the money you are otherwise qualified to receive; or,

2) The City may be required to withhold 31% of the money you are eligible to receive in order to cover any federal taxes you could owe as a result of receiving funds from the City. Note that you may <u>not</u> owe any taxes on the money, but if we do not have the information on the attached form, we have to assume you do owe taxes. We are required by federal law to send the 31% withheld to the Internal Revenue Service (IRS) and you will be sent only the remaining 69% of the money. *Once a withheld amount is sent to the IRS, we cannot get it back. Rather, you will have to seek a refund as part of your individual or business federal tax process.*

If you have any questions or concerns about:

- a specific contract, grant, loan, invoice or payment, please direct them to the contact person identified on the agreement.
- this letter or the accompanying form, please contact Vendor Relations at (206) 684-8335.

We thank you for doing business with The City of Seattle and look forward to a mutually satisfying business relationship. As an Equal Opportunity Employer, The City of Seattle consistently supports small and large businesses and seeks to create economic opportunities for all member of the City's many diverse communities.

FORM 3: PAYMENT INFORMATION AND QUALIFICATION FORM

Page 1

To assure prompt and full payment, this form must be fully completed & returned within 20 days by FAX or MAIL (not both) to:

MAIL to: City of Seattle Contracting Services Vendor Relations 700 – 3rd Avenue #910 Seattle, Washington 98104-1808	**FAX to:** (206)684-0282

Please print or type

1. **Name of Company, Organization or Name of Person if payment is to an individual:**

2. **Other Business/Organization Names Used (e.g., dba – "Doing Business As"):**

3. **Name appearing on your invoice if different from 1 or 2 above:**

4. **Name as listed on your Employer Identification Certificate or your Social Security Card:**

5. **Employer Identification Number (EIN) or Social Security Number (SSN):**

6. **Payment Address** (where to send payments)**:**

Street/P.O. Box		
City	State	Zip Code (please use 9 digits)
Contact Name	Telephone No. ( )	Fax No. ( )

FORM 3: PAYMENT INFORMATION AND QUALIFICATION FORM

Page 2

7. Sales Address (if applicable, where to send solicitations and contracts)**:**

Street/P.O. Box		
City	State	Zip Code (please use 9 digits)
Contact Name	Telephone No. ( )	Fax No. ( )

8. Type of Organization or Business (select one)**:**

[ ] Individual, not an organization or business	[ ] Sole Proprietorship
[ ] Partnership	[ ] Firm/Individual providing medical services
[ ] Corporation	[ ] Tax Exempt Organization
[ ] Other (please explain):	

9. Washington State Business/Tax Number (UBI) (if applicable)**:**

10. City of Seattle Business License Number (if applicable)**:**

11. Small Business Status (if applicable)**:**

[ ] Women-Owned Business	[ ] Minority-Owned Business

FORM 3: PAYMENT INFORMATION AND QUALIFICATION FORM

Page 3

Grant and Loan Recipients, skip to Item 13

12. Qualification to do business with The City of Seattle:

> In order to be qualified to do business with the City of Seattle, the company must agree that it will not discriminate against any of its employees or applicants for employment with regard to Creed, Religion, Race, Color, Sex, Marital Status, Sexual Orientation, Political Ideology, Ancestry, National Origin, or the presence of an Sensory, Mental or Physical Handicap, unless based upon a bona fide occupational qualification.
>
> **[ ] YES, the company agrees that it will <u>not</u> discriminate.**
> **[ ] NO, the company does not agree, and therefore will NOT**
> **be able to sell goods or services to the City.**

13. Affirmation:

I affirm that the foregoing is true and correct to the best of my knowledge and information.

(This form should be signed by an Authorized Representative of the Business or by the individual, but it does not need to be notarized.)

Your Signature:

Your Name Legibly Printed:

Signed at (City and State):

Date:

SECTION 2:   TRANSMITTAL LETTER AND EXECUTIVE SUMMARY

FORM 4:   TRANSMITTAL LETTER

[Use this space to compose a cover letter for your proposal. A cover letter must certify that the initial cost information covers all expected application costs associated with the project as proposed. NOTE: The cover letter should not provide any actual cost or pricing information; this is accomplished in Section 5 the Financial Proposal.

The letter must be signed by an officer or employee empowered to legally bind the company.

The Vendor should also identify the person who will act as the primary contact throughout the proposal evaluation process. Include the person's position in the organization, a mailing address, telephone number, facsimile number, and Email address.]

FORM 5: **EXECUTIVE SUMMARY**

[This should consist of a brief three (3) page summary of the system that is being proposed, including a description of the configuration, hardware, and software. You may also use this form to summarize your firm's qualifications, why your firm is pursuing this work and how it is uniquely qualified to perform it.]

SECTION 3:   VENDOR BACKGROUND AND PROJECT TEAM INFORMATION

FORM 6:   VENDOR BACKGOUND AND QUALIFICATIONS

1.   EDM Software Company Information:

For the EDM software being proposed, describe the following for the software company's business area dedicated to imaging, electronic folder management, electronic document management, computer output to laser disk and workflow; products, service, and support.

Name of Company	
Length of time in Business (years)	
Describe general types of paperless products and services offered by company	
Length of time in business of implementing and licensing proposed EDM software (years)	
Gross revenue for prior fiscal year (in US Dollars)	
Percentage of gross revenue generated by implementing and licensing proposed EDM/imaging software	
Number of clients with the proposed EDM/imaging software installed	
Number of clients with proposed EDM/imaging software that utilizes capture, storage and retrieval of large e-size images.	
Average number of seats per installation for the proposed EDM/imaging software	Total? Concurrent? Thin?
Location of Headquarters	
Location of field office that will service this account	
Number of full time employees supporting proposed EDM/Imaging software	
Percentage of employees in research & development, customer support, and sales/marketing for the main proposed solution	
Examples of clients in which proposed EDM/imaging software solution has been implemented (i.e. similar to DCLU in size and complexity, if possible)	

2.   Integration Company:

For the integrator being proposed, describe the following for the business area dedicated to imaging, electronic folder management, electronic document management, computer output to laser disk and workflow; products, service, and support.   (Skip this section if no integrator will be used.)

Name of Company	
Describe general types of products and services offered by company	
Length of time in Business	
Length of time in business of implementing proposed EDM/imaging software	
Gross revenue for prior fiscal year (in US Dollars)	
Percentage of gross revenue generated by implementing proposed EDM/imaging software	
Number of clients for whom company has implemented the paperless technology solutions	
Number of clients for whom company has implemented the proposed EDM/imaging software solution	
Examples of clients in which company has implemented proposed EDM/imaging software solution (i.e. similar to DCLU in size and complexity, if possible)	
Location of Headquarters	
Location of field office and support group that will service this account	
Number of full time employees supporting the proposed EDM/imaging software solution	
Percentage of employees in integration, customer support, and sales/marketing	

4. Please indicate any outstanding litigation:

    for the proposed Integration Company:

    for EDMS Software Company:

FORM 7:   PROJECT STAFF:

The City would like to know how your project team will be assembled and which roles are emphasized using your approach. Using the table below, identify and propose a set of project roles to assist the City with development, implementation and training of the system. Please add lines as necessary and complete the following table to identify the roles of the proposed project staff who will assist the City. Indicate the responsibilities expected for each role and the amount of time each role will be dedicated to the project. Please note that we are not asking for specific names in this table, only project roles.

STAFF MEMBER ROLE	Responsibilities	Number of hours assigned to the Project
(Example) System Analyst		
(Example) Project Manager		

FORM 8:   KEY PROJECT LEADS BACKGROUND INFORMATION:

Complete the following table for each of the key project staff member. The project manager's information should be listed first. Please include a table for each key staff member as well as a table for the individual with the most hours on the project. Include up to 3 customer references for each individual. Use your word processor's copy and paste commands to create additional copies of this table. Please allow no more than two pages for each table.

Staff member name			
Employee or subcontractor			
Position in the company			
Length of time in position			
Project role			
Education in proposed software			
Previous work experience in proposed software			
Technical skills and qualifications for the project position			
Experience installing proposed system:	**Reference 1**	**Reference 2**	**Reference 3**
• **Customer name**			
• **Contact person and phone number**			
• **Application (i.e. Insurance claims, permit processing, etc…)**			
• **Size of installation (i.e. number of users, number of documents)**			
• **Project position/responsibilities**			
• **Start date**			
• **Scheduled end date**			
• **Actual completion of installation (date)**			

FORM 9: VENDOR REFERENCES:

Vendors must submit a minimum of two (2) relevant references each for both the software being proposed and the project integrator. Copy and paste additional tables as needed.

NOTE: The City reserves the right to contact and/or visit the customer references identified by vendors, as well as any other customers and customer employees, subcontractors and others, not identified by vendors, who have direct experience with the vendor.

Reference for (check one):	☐ Software vendor ☐ Software integrator
Customer name	
Contact name	
Title	
Application type (e.g. permit processing, claims)	
Phone number	
Fax number	
Software and version	
Installation Date	
Production Date	

SECTION 3:   SYSTEM INFORMATION

FORM 10:   FUNCTIONAL REQUIREMENTS

[For each requirement, please check "YES" if the proposed system performs the functional capability completely without any modifications. If modifications are required, please check "YES, with modifications", If your proposed system does not perform the functional requirement at all, please check "NO".]

REQUIRMENT	YES	NO	YES, with MODI-FICA-TIONS	EXPLANATIONS
A. Capture Requirements				
Does the proposed system have the capacity to capture over 15 million pages initially (backfile conversion, plus future growth)?				
Does the proposed system have the capacity to handle an annual growth of 900,000 pages per year (including 100,000 "E" size drawings)?				
Does the proposed system have the capacity to capture images ranging from 3x5 to 8.5x11, to "E" size drawings in both simplex and duplex format?				
Does the proposed system have the capabilities to capture "E" size drawings with 500 or greater pages?				
Does the proposed system have the ability to capture and upload document in their native document formats (e.g. Word, AutoCAD, Excel, PowerPoint, etc)?				
Does the proposed system have the ability to capture color images?				
Does the proposed system have the ability to upload and index native documents from within their native application?				
Does the proposed system have the ability to capture and upload voice, digital photo and video formats?				
Does the proposed system have the capabilities to meet an image requirement of 200 & 300 DPI, Group 3 & 4 and lossless?				

REQUIRMENT	YES	NO	YES, with MODI-FICA-TIONS	EXPLANATIONS
Does the proposed system have the capacity to store images in a TIFF and/or PDF format?				
Does the proposed system have the capabilities to support a combination of small, mid-size and large volume scanners?				
Does the proposed system have the ability to support barcode recognition?				
Does the proposed system have any limitation on the number of barcodes that can be recognized per document?				
Does the proposed system have the ability to support ICR/OCR recognition?				
Does the proposed system have the ability to support upload of faxed documents (Rightfax)?				
B. Index Requirements:				
Does the proposed system the ability to assign at least 20 indexes per document?				
Does the proposed system have any limitation on the number of indexes that can be stored?				
Does the proposed system have the ability to store multiple index types (character, numeric, date, etc)?				
Does the proposed system have the ability to support index lengths up to 230 characters?				
Does the proposed system have the ability to capture document indexes manually, via bar recognition, via OCR/ICR recognition and electronic upload?				
Does the proposed system have the ability to gather and assign indexes electronically? An example of electronic index assignment would be the automatic assignment of the address index based on documents project number from the Hansen Permit Tracking System.				

REQUIRMENT	YES	NO	YES, with MODI-FICA-TIONS	EXPLANATIONS
Does the proposed system have the ability to modify indexes?				
Does the proposed system have the ability expand the number and size of indexes in the future?				
Does the proposed system have the ability to store indexes in a relational database format?				
Does the proposed system have any index limitation regarding the length and number of indexes supported?				
C. Retrieval Requirements, both thin and thick client, noting when either or both are applicable.				
Can the proposed system provide direct access to documents via key word searches of the document indexes?				
Can the proposed system support the following search capabilities: • The ability to search via any combination of key indexes • The ability to search on ranges (e.g. date range, address range, etc…) • The ability to perform partial match and soundex searches • The ability to support the use of search strings (e.g. and, or, not, less than, greater than, wild card,)				
Does the proposed system provide the ability to save a search request for future usage?				
Does the proposed system support advance search without the use of scripting?				
Does the proposed system have the ability to assemble/retrieve images and native format documents in a folder orientation?				

REQUIRMENT	YES	NO	YES, with MODI-FICA-TIONS	EXPLANATIONS
Does the proposed system support the following folder capabilities: • The ability to establish a hierarchical structure within a folder type. (e.g. folder-sub folder-document-page) • Folder and sub folder orientation shall be assembled by the indexes defined to the document. (e.g. the document type index may define which sub folder the document is placed in) • The ability to assemble/retrieve an average of 50 pages per folder to over 1000 pages. (including "E" size images)				
D. Viewing Requirements both thin and thick client, noting when either or both are applicable				
Can the proposed system provide the ability to view images using a viewer in a Windows environment?				
Can the proposed system support the ability to pan, zoom (in & out) , and scale documents?				
Can the proposed viewer support the ability to go to a specific page within a document?				
Can the proposed viewer support the ability to utilize a bird's eye view? (e.g. "E" size images)				
Can the proposed viewer support the ability to view images utilizing a thumbnail view?				
Can the proposed viewer support the ability to view native file format documents utilizing a thumbnail view?				
Can the proposed viewer support the ability to view images ranging from 3 x 5 documents to "E" size drawings?				
Can the proposed viewer support the ability to launch multiple viewers each showing different document or different pages within a document?				
Can the proposed viewer support the viewing of color images?				

REQUIRMENT	YES	NO	YES, with MODI-FICA-TIONS	EXPLANATIONS
Can the proposed viewer's menu and button bar be configured for different usage profiles?				
Can the proposed system provide the option to view native format documents using a vendor supplied viewer and/or the documents native software?				
Does the proposed systems thin client provide the above listed viewing functionality? If no, list differences.				
E. Annotation				
Does the proposed system have the ability to annotate documents?				
Does the proposed system provide the ability to annotate via sticky notes, direct markup on image (type, lines, arrows) and stamps?				
Does the proposed system provide the ability to store multiple annotation per document/page? Describe any limitations?				
Does the proposed system provide the ability to provide an audit trail of annotations?				
Does the proposed system have the ability to view and print with or without annotations? Who created/modified and date stamped.				
Does the proposed system have the ability to track who created/modified and date stamped the annotations?				
Does the proposed system provide the ability to separately track annotations?				
Does the proposed system provide the ability to annotate native file format document in a "read-only" manner?				
Does the proposed systems thin client provide the above listed annotation functionality? If no, list differences?				

F. Output				
Does the proposed system have the capacity to print to network printer/plotters?				
Does the proposed system have the ability to download selective images, document and associated indexes to disk (CD-Rom, Tape, etc…)?				
Does the proposed system have the ability to print in color?				
Selected documents will need to be outputted directly to microfilm, can the proposed system support the above?				
G. Retention/Disposition				
Compliance with Washington State RCW will require that require DCLU to develop Microfilm of selective document for the Washington State Archives. To support this requirement DCLU will need to output selected documents from the EDMS to Microfilm. Does the proposed system support the above requirement?				
Certain EDMS system documents will need to be deleted on a regular and scheduled basis, can the proposed system support the above requirement.?				

FORM 11:   INTERFACE REQUIRMENTS/QUESTIONS

[For each requirement, please check "yes" if the proposed system support the requirement. If your proposed system does not satisfy the requirement at all, please check "no".]

REQUIREMENTS	YES	NO	EXPLANATION
DCLU is currently implementing the Hansen Land Management System v7.5 as its primary tracking system, does the proposed system support the document management enabling of various Hansen user screens including those that providing Address information and project information? **Hansen Information Technologies can be contacted at 1-800-821-9316 (Bob Benstead)**			
Does the proposed system have the ability to utilize Hansen's Land Management System v7.5 security profiles?			
Does the proposed system utilize Novell NDS security profiles?			
Does the proposed system utilize NT security profiles?			
Does the proposed system integrate to Records Management Software?			
Is the proposed system MAPI compliant?			
Does the proposed system integrate with Novell Groupwise v5.5?			
Does the proposed system have the ability to provide a tool bar icon within a Windows 95 and later version software applications (Word, Excell, Visio), which will allow the user to upload/index native file format documents?			
Does the proposed system have the ability receive/send faxes via Rightfax v6.0?			

FORM 12:   TECHNICAL REQUIRMENTS/QUESTIONS

[For each requirement, please check "yes" if the proposed system support the requirement. If your proposed system does not satisfy the requirement at all, please check "no".]

REQUIREMENTS	YES	NO	EXPLANATION
A. Workstation			
Does proposed system operate on Windows 95 and higher version operating system?			
B. Server Platform			
Does the proposed system support Unix-AIX and/or Microsoft NT as a database server platform? If limitation, please describe?			
Does the proposed system support Unix-AIX and/or Microsoft NT as an image server platform? If limitation, please describe?			
Is the proposed system written in 32-bit mode? If not explain?			
C. Database			
Does the proposed system support Oracle and/or SQL Server as a relational database system? If limitations. Please describe?			
What releases of the Oracle and SQL Server are supported?			
D. Network Protocol			
Does the proposed system use TCP/IP as its network protocol?			
E. Security			
Does the proposed system have the ability to assign security levels by user and group?			
Does the proposed system have the ability to integrate it's security to Novell's NDS?			
Does the proposed system have the ability to establish security per user/group at the following profile? • Scan • Upload • View • Annotate • Print • Download			
Does the proposed system have the ability to establish security at the folder, sub-folder and document level?			

REQUIREMENTS	YES	NO	EXPLANATION
Are all the security modules of the proposed system integrated? If not, explain?			
F. Documentation			
Does the proposed solution provide electronic and hard copy user documentation?			
Does the proposed solution provide electronic and hard copy system/software administration documentation?			
Does the proposed system include the system's Entity-Relationship (E-R) diagram and associated table and field definitions?			
Will you provide changes to the E-R diagram and data dictionary if you change and upgrade the system in the future?			
G. Storage Requirements			
Does the proposed system have the capacity to store over 15 million pages?			
Does the proposed system have the ability to store documents in their native document format (e.g. Word, AutoCAD, Excel, etc)?			
Does the proposed system have the ability to store images in a TIFF and/or PDF format?			
Does the proposed system have the ability to store an image at 200 & 300 DPI, Group 3 & 4 and lossless?			
Does the proposed system support magnetic storage long-term storage? If yes, are their limitations?			
Does the proposed system support optical/tape storage for long term storage? If yes, are their limitations?			
Does the proposed system have a Hierarchical Storage Manager (HSM) strategy? If yes, whose product is being used?			
Does the proposed system have caching capabilities and strategies?			
Does the proposed system support a record's disposition strategy?			
H. Capacity/Performance			

REQUIREMENTS	YES	NO	EXPLANATION
Do you provide documentation on how to monitor and tune the performance of the system? Please explain?			

Will the proposed the system complete, on average, all on-line transactions:
   ▪ in 2 or less for documents retrieved from magnetic,
   ▪ in 5 seconds or less for documents retrieved from optical disk loaded and spun-up in an optical drive,
   ▪ in 15 seconds of less for documents stored on an optical disk within a jukebox (not yet loaded)			

FORM 13:   **SYSTEM ARCHITECTURE (DESIGN)**

Based on DCLU requirements, provide a summary (**limited to no more than 15 pages**) of the proposed system architecture in this chapter. The elements included in the Vendor's response should be:

▪ A description of the software being proposed, include software manufacture and version numbers,
▪ A description of all hardware being proposed, include hardware manufacture, model numbers, and specific configurations.
▪ A description of the proposed system strategies for
    ♦ backfile conversion,
    ♦ system capture,
    ♦ viewing,
    ♦ retrieval,
    ♦ storage, caching, HSM
    ♦ Internet.
▪ A description of the server architecture being proposed.
▪ A description of how you intend to image enable the EDMS with the Hansen Land Management System.
▪ A description of ability to handle large raster images [e-size] and large file folders [500-1000 pages]

SECTION 4:   IMPLEMENTATION AND SUPPORT INFORMATION

FORM 14:   IMPLEMENTATION REQUIREMENTS

Based on DCLU requirements, provide a summary (**limited to no more than 5 pages**) of the proposed system implementation approach in this chapter. The elements included in the Vendor's response should be:

A.   IMPLEMENTATION APPROACH

Please describe your approach to implementation addressing the following areas:

- Fit analysis: Identifies the functional fit between the proposed system and the City's desired business processes, the setup requirements (folders, processes, business rules, property characteristics, people/organization characteristics); and impact on the organization.
    ⇒ Discuss your experience with organizations similar to DCLU?
- System implementation and integration: Describe your approach to installation and rollout of the system.
- System testing: Identify the process through which the system is evaluated in order to ensure that appropriate functionality has been implemented.
- System acceptance: Identify the criteria and metrics used to determine whether or not the system has been adequately implemented.
- System rollout support: Identify and describe the approach to the level and type of training support that will be provided to DCLU as well as the availability of technical support during the rollout phase of the implementation.

B.   PROJECT TIMELINE:

Please describe your ability to meet an expected project timeline of six months.

C.   IMPLEMENTATION WORK PLAN

Please provide a detailed project implementation plan that includes a Gantt chart showing each task with associated beginning and ending dates.

Also, please complete the following table listing vendor staff and their assigned labor hours for each task. Note: the roles should correspond to the roles in Form 7.

TASK	TASK Description	Staff Title/Role	Estimated hours assigned to Task

D.   CITY STAFFING ESTIMATES

Please indicate the role and amount of time required from DCLU staff in your implementation approach, including specific task assignments.

TASK	TASK Description	Staff Title/Role	Estimated hours assigned to Task

E.   PROJECT ORGANIZATION CHART

Please provide an organization chart that depicts your team's organization and the anticipated relationships between the team and DCLU.

E.   TRAINING PLAN:

Please fill in the following table describing your training approach for the positions indicated.

POSITION	Training Course(s) / Location	Hours of training provided
End User		
Application Administrator		
Technical System Administrator		

FORM 15:   MAINTENANCE AND SUPPORT:

1. Please detail the terms and conditions for annual maintenance for the proposed system, including renewal costs for future years.

2. Please complete the following table for the maintenance and support proposal:

Is help desk support available?	
When is support available? (indicate XX AM - XX PM, in Pacific time, and days of the week)	
How are charges for support structured (e.g., free, flat-fee or per incident)?	
Do you provide on-site support?	
Is support provided by a centralized support center or by on call technicians?	
Number of employee in the support group?	
Ratio of support employees per installed seat?	

3. Please describe your proposed problem escalation process:

Who provides initial contact and logging (integrator or EDMS software company)?	
Who provides initial problem identification?	
After initial problem identification, how is priority and severity of problem identified and resolved?	
Number of companies outside support provider required to provide support to major software modules?	
Steps for resolving problem escalation when a solution is not forthcoming or an implemented solution is unsatisfactory?	
Final authority regarding conflicts?	

4. Does the proposed solution provide the ability to contract directly with the Software Company for support?

5. List any training, user conferences, and work shops your firm sponsors, attends, or recommends to support your product.

6. Will you continue to support the application if enhancements/upgrades are not implemented? If not implemented as released, how many versions back are supported?

7. Is installation assistance provided for bug fixes and for updates as part of the proposed maintenance and support agreement?

8. How does customization affect the ongoing maintenance and support of the proposed system?

9. Please describe any planned upgrades and major releases anticipated within the next two years, including schedule?

10. Does the proposed maintenance and support agreement include future versions of the product?

11. Does the proposed maintenance and support agreement include installation support for future version upgrades?

12. Please describe your approach to upgrading the application and state if there are upgrade costs other than those accounted for by annual maintenance fees?

13. Please describe the typical client IT **staff skill sets and time commitments per week** (# FTE) required to manage the system on an ongoing basis for the following areas:
    - Database Management
    - Network & Operating Systems Support
    - Desktop Support
    - User Functional Support
    - Hardware Maintenance
    - Others?

14. How do you warranty your software? Describe the length, terms and conditions of the warranty, and indicate whether coverage includes:
    - Labor
    - On-Site consultation
    - A telephone help line
    - Remote Diagnostics
    - Upgrade to base level software and documentation
    - Maintenance releases and software fixes
    - Performance/response time
    - Bugs discovered after acceptance

15. How do you warranty your hardware? Describe length, terms and conditions of the warranty, and indicate whether it includes:
    - Labor
    - On-Site consultation
    - A telephone help line
    - Remote diagnostics

FORM 16:   **MAINTENANCE AND SUPPORT AGREEMENT**

[Provide a copy of the maintenance and support agreement you are proposing as part of the proposed system]

FORM 17:   **LICENSING AGREEMENTS**

[Please provide a copy of the Software Licensing Agreements for the proposed system.]

FORM 18:   **INSTALLATION AGREEMENT**

[Appendix A includes the City's installation terms and conditions, Please document any objections to the proposed terms here. Provide alternative contract language for all changes to the terms.]

SECTION 5:   **FINANCIAL PROPOSAL**

FORM 16:   **FINANCIAL PROPOSAL**

[Vendors' proposals must complete the comprehensive cost statement presented on the following three pages. All costs are to be contained in this statement. This statement shall also include payment terms required for services rendered.]

The prices included must represent the Vendor's actual costs that will be associated with implementing and delivering the proposed system.

Cost information must include all expected implementation and operating costs, both one-time and on-going. Specific model numbers and capacities should be included. Information about license sizes must be provided. Vendors should describe and quote optional components -- including query tools, hsm, report writers, etc. -- as individual and separate items. Any upgrade to the base system needed for optional components must be included in the cost of those components. All prices are to be in U.S. dollars and include all applicable taxes. Add more lines to the table as necessary.

<div align="center">

COST STATEMENT DESCRIPTION

</div>

STATEMENT COLUMN	DESCRIPTION
Cost Item	This column presents the items for which cost information must be provided.
Unit Price	Indicate vendor's discounted price for the item.
Extended Price	Indicate the total cost for the item
Recurring Cost	Indicate all expected costs which the City would incur on an ongoing basis. Annualize this number and indicate in the comments when the City would begin incurring this cost (e.g., at acceptance, at installation, 1 year after acceptance, etc.). Also describe what is provided with your annual maintenance fee, include application, and third party vendor specifics).
Comments	In this column, please provide additional information about your costs. Where units is greater than one, please explain why in the comment field.

A. Scanners

In the table below, provide the associated costs of the proposed scanning solution. Provide costs for each type of scanning solution, including the scanner manufacture and technical specification of the scanner (speed and resolution).

Item – Detail	Units	Unit Cost	Extended Cost	Recurring Costs (Maintenance)	Comment
Total:					

B. Capture

In the table below, provide the associated costs of the proposed capture software. Capture refers to upload and indexing of images and electronic documents.

Item – Detail	Units	Unit Cost	Extended Cost	Recurring Costs (Maintenance)	Comment
Total:					

C. Application Software

In the table below, provide the associated costs of the proposed application software. Item should include the name of the software manufacture.

Item – Detail	Units	Unit Cost	Extended Cost	Recurring Costs (Maintenance)	Comment
1. Viewer:					
2. Image/EDM:					
3. Workflow:					
4. Other:					

D. Hardware Costs

In the table below, provide the associated costs of the proposed system hardware, including the name of the hardware manufacture. Include a line of each major hardware component.

Item – Detail	Units	Unit Cost	Extended Cost	Recurring Costs (Maintenance)	Comment
Total:					

E. Training Costs

In the table below, provide the associated training costs of the proposed system solution. List each class seperately.

Item – Detail	Unit Cost	Extended Cost	Comment
Total:			

F. Conversion Costs

In the table below, provide the associated conversion costs of the proposed system solution. Cost should include all cost associated with conversion (i.e. scan, index, quality control, upload)

Item - Detail	Unit Cost	Extended Cost	Comment
Cost per page			
Cost per Microfilm			
Cost per Microfiche			
Total:			

G. Implementation Costs

In the table below, provide the associated integration/implementation/customization costs of the proposed system solution.

G.1 Task Costs: the implementation task should correspond to the project tasks provided in Form 14.C (i.e. Project Management)

Implementation Task – Detail	Task Cost	Comment
Total:		

G.2 Job Title Costs: the Job-titles should correspond to the roles in Form 7. (i.e. Project Manager)

Job-title	Hourly Rate	Comment
Total:		

H. Other Costs

Cost not reflected in the above categories

Item - Detail	Unit Cost	Extended Cost	Comment
Total:			